

NC Health Choice (NCHC)

North Carolina Health Choice is health coverage that is to be provided under the federal Title XXI program, which was approved by the North Carolina General Assembly, signed into law by Governor Hunt and approved by the United States Health Care Financing Administration (HCFA). The program was implemented in October 1998, allowing families to obtain health coverage for their children who are otherwise ineligible for Medicaid and not covered by comprehensive health insurance.



In addition to family income eligibility, children must have been uninsured for two months prior to their application, unless the child has special needs that must be verified by a health care professional. It must be determined the child or children are not qualified for Medicaid.

There are essentially two countable income levels. If the family's countable income is at or below 150% of the federal poverty level, there is no fee required. If the family's countable income is at or below 200% of the federal poverty level, there is a fee of \$50.00 for one child and \$100.00 for two or more children.

Q. What is special about NC Health Choice?

A. Low-income families are able to get health insurance for their children. North Carolina's children's health insurance plan "NC Health Choice" will cover children from low-income families that make too much to qualify for Medicaid.

Why health insurance is important:

When working families cannot afford health care for their children, the consequences can be dire. Babies may not get the checkups that make sure they are growing healthy and strong. Families may wait until a child is very sick before seeking medical help, sometimes getting help only in an emergency. Untreated illnesses can have long-lasting consequences, such as hearing loss caused by ear infections.

What it costs:

For families who make less than 150% of the federal poverty level, there will be no additional cost. For those families with an income greater than the levels listed below, there will be an annual cost of \$50 for one child and \$100 for two or more children. There will also be a co-payment levied per visit to physician, dentist, optometrist, clinic, outpatient hospital visit, etc.; per prescription for drugs; and for non-emergency emergency room visits. There will be no charge for anyone for well child and other preventive health visits.

What is covered:

This is a comprehensive health insurance plan which covers not only hospitalization but also outpatient care. Preventive dental, vision and hearing benefits are available. The following is a summary of benefits:

- *Hospital Care* - Semiprivate room, medications, laboratory tests, x-rays, surgeries, and professional care.
- *Outpatient care* - includes diagnostic services, therapies, laboratory services, X-rays, and outpatient services.
- *Physician and clinic services* - office visits; preventive services such as four well-baby visits up to one year of age, three visits per year between one and two years of age and one visit per year between 2 and 7, and once every three years between 7 and 19. Immunizations are covered.
- *Surgical services* - includes standard surgical procedures, related services, surgeon's fees, and anesthesia.

- *Prescription drugs*
- *Laboratory and radiology services*
- *Inpatient mental health services* - requires precertification
- *Outpatient mental health services* - requires precertification after 26 outpatient visits per year.
- *Durable medical equipment and supplies such as wheelchairs*
- *Vision*
- *Hearing*
- *Home health care* - limited to patients who are homebound and need care that can only be provided by licensed health care professionals or in the case that a physician certifies that the patient would otherwise be confined to a hospital or skilled nursing facility. Professional health care is covered; care provided by an unlicensed caregiver is not.
- *Nursing care*
- *Dental care* includes oral examinations, teeth cleaning, and scaling twice during a 12-month period, full mouth X-rays once every 60 months, bitewing X-rays of the back teeth once during a 12 month period and routine fillings.
- *Inpatient substance abuse treatment and outpatient substance abuse treatment* - is covered. See the mental health inpatient and outpatient notes above.
- *Physical therapy, occupational therapy and therapy for individuals with speech, hearing and language disorders*
- *Hospice care*
- *Special needs children with chronic mental or physical conditions or illness may receive services beyond those listed above if services are medically necessary and receive precertification.*

Once a child has been covered under this plan, should family economic conditions change so that the child is no longer eligible, but the family wants the child to continue in the program, the family will be allowed to purchase the plan at full premium for one year.

Applying for Health Choice insurance for your children:

A two page application form, income verification and enrollment fee (if required) are needed to approve the application. This application form will be made available at Social Services and Health Department. The application can be mailed in or taken to your county social services department. To expedite the process, come to Department of Social Services for a face to face interview. Each application will first be looked at to see if the child is eligible for Medicaid and, if not, then looked at to see if the child is eligible for the new program. If the child is found to be eligible, the application will be processed and the parents will receive a health card, a benefits booklet and instructions in the mail. Once parents are notified, the child is eligible to receive care.

Note: Unlike Medicaid, this program is limited by the amount of funds which are available. Therefore, it is open only to children on a first come, first served basis. Once the program is full, a waiting list will be taken, so it is in the best interest of the child to enroll as soon as it is possible. The state does feel that there are enough funds to cover all available children, however, there is no exact count of the numbers of uninsured children in the state. The state discourages families from dropping current health coverage in order to enroll in the new child health insurance plan. Every effort will be made to notify families through various media that this program exists and who is eligible.